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MR. LAWSON: Thank you. Our next speaker

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will be Erica Frank, to be followed by Sheri Mann

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1 Stewart. And while Ms. Frank is going up there,
2 let me ask the court reporter how are you doing.
3 We're roughly a little bit more than half. If you
4 want to take a break after the next two, that
5 would be good.

6 THE REPORTER: I would appreciate it.

7 MR. LAWSON: We'll take two more speakers,
8 then we'll take a five-minute break.

9 (Brief recess.)

10 MS. FRANK: Thank you. Our society has made
11 a commitment to creating hazardous nuclear waste
12 for the time being; and this is, of course, a
13 commitment that itself should be questioned but a
14 commitment whose ramifications we need to deal
5 15 with now. [I'm a specialist in preventive medicine.
16 My name, again, is Erica Frank. I'm the director
17 of the preventive medicine residency program at
18 Emory, and I'm a national board member of
19 Physicians for Social Responsibility.

20 I believe it medically and socially
21 irresponsible to discuss repeatedly transporting
22 spent nuclear fuel through millions of Americans'
1... 23 backyards.] There are two major issues: [first,
24 that of routine safety issues and the ongoing
25 exposure millions are guaranteed to have to low-

1 cont. 1 level increased radiation. On an individual
2 level, these exposures will mainly be trivial,
3 certainly; but we cannot know what their effects
4 will be. And this issue of hubris is a real one.
5 I do know, though, that my husband, two-year-old
6 son and I live across the street from a major CSX
7 line, and I do not want casks parked overnight in
2... 8 my backyard or in anybody else's backyard. Second,
9 there are concerns regarding non-routine safety
10 issues or our vulnerability to the horrible,
11 nearly inevitable, non-routine emergency safety
12 issues that will arise because of accidents -- the
13 DOE acknowledges this -- or, perhaps even more
14 frighteningly, which hasn't been discussed much
15 here this afternoon, because of deliberate acts of
16 domestic or non-domestic terrorism.

17 First, the accidents. Again, my specialty is
18 preventive medicine, and preventive medicine's
2 cont. 19 about risk reduction. The American Petroleum
20 Institute says that for every million miles
21 traveled there are six heavy truck accidents.
22 Such accidents can, of course, include fires and
23 explosions both of the combustible materials
24 carried by the trucks themselves and from whatever
25 unpredictable combination occurs in a collision.

1 Second, terrorism. In the past several years
2 Atlanta has been periodically exposed to a siege
3 mentality due to the explosion of bombs made from
2 cont. 4 materials as inert as a nail. [Can you imagine what
5 a tempting target a cargo of nuclear waste will be
6 and how devastatingly frightening to our populace?
7 And this isn't just a one-time, short-term threat.
8 This is the decades-long threat of leukemia; of
9 breast, thyroid, colon and lung cancer and of
10 diseases about which we can only guess.]

11 Georgia has become an increasingly attractive
12 place to visit and live. I don't know much about
13 about towns in the former Soviet Union or even
3 14 about many towns in the northeast, [but I do know
15 that Chernobyl and Three Mile Island have become
16 synonymous for inadequate emergency planning for
17 the inevitable, potentially enormous nuclear
18 problem and that these have become places no one
19 would even want to visit, much less live. We do
20 not want the same kind of connotations for Atlanta
21 or Chattanooga or Chicago. We cannot afford it
22 from a health or an economic perspective.]

23 To conclude, the role of government in this
24 is clear: to protect the people, to protect my
25 patients, our colleagues, our friends and

4 1 neighbors and our families. [Human error and
2 systems happen, which is acknowledged by DOE. But
3 if one transports thousands of shipments over
4 cumulative millions of miles, risks that are only
5 one in a million become virtually guaranteed. We
6 must make our government keep waste transportation
7 and power companies from making profits at our
8 considerable peril. The classic textbook Public
9 Health and Preventive Medicine states that
10 radiation protection has developed from using
11 basic principles of protection against external
12 irradiation in occupational settings: shielding,
13 distance, time and training. We must take those
14 basic principals, especially those of shielding,
15 distance and time, to heart.] Government must
16 protect the people. That is the government's most
17 fundamental responsibility. Thank you.

18 MR. LAWSON: Our last speaker before we take
19 a break is Sheri Mann Stewart.